

AUDIOLOGICAL INTERVENTION

For parents who decide to provide their children with amplification, early intervention services can provide a vital opportunity for stimulation of the child's auditory system. This can be accomplished through the use of hearing aids, FM systems, cochlear implants or other assistive technology.

Infants with severe to profound hearing loss or auditory dyssynchrony and who do not benefit from traditional amplification may benefit from a cochlear implant. Cochlear Implantation usually can occur between 12-18 months of age. A referral to a cochlear implant center should be made when parents are seeking information regarding cochlear implantation and should not be delayed. ([LINK to CI Centers](#))

COMMUNICATION OPTIONS

Families of newly diagnosed infants with hearing loss may be met with a confusing array of opinions about ways they should communicate with their infant. The fact is, there are a variety of ways of appropriate methods or strategies for communicating with infants with hearing loss. The goal is to help a family find a successful match for them and their infant. The process of developing communication should be flexible, changing over time as the infant's needs change. Parents may ask the physician for information as to which approach is best. The most appropriate response is to guide the family to be flexible and to work with their infant-parent specialists to gather information on all approaches to support their decision-making. Communication tools include:

- American Sign Language
- Auditory Oral
- Auditory Verbal
- Cued Speech
- Total Communication

COCHLEAR IMPLANTS

Cochlear Implants are a proven medical option for children with profound hearing loss in both ears. The FDA has approved cochlear implants in children as young as 12 months of age. Below are general guidelines for cochlear implant candidates:

Young Children: 12 months-2 years

Profound sensorineural hearing loss in both ears (>90 dB)

Lack of progress in development of auditory skills with hearing aids (usually 3 months of consistent hearing aid use)

High motivation and realistic expectations from the family

No other existing medical condition that would interfere with the cochlear implant procedure

Children 2 years –17 years

Severe to profound hearing loss in both ears (>70 dB)

Little or no benefit from hearing aids as demonstrated on open set speech recognition tests

Lack of progress in the development of auditory skills

High motivation and realistic expectations from the family

COCHLEAR IMPLANT CENTERS

The following hospitals are approved providers for cochlear implants through Children's Special Health Care Services:

University of Michigan Cochlear Implant Program

475 Market Place, Building 1 Suite A

Ann Arbor, MI 48108

Ph. 734-998-8119

Fax 734-998-8122

Contact: Terry Zwolan, Ph.D. emailzwolan@umich.edu

To schedule an appointment, please contact Michelle Schook email msrb@umich.edu

The Marie Carls Communication Disorders Center

Children's Hospital of Michigan

3901 Beaubien

Detroit, MI 48201

Ph. 313 -745- 8903

Fax 313-966-2694

Contact: Fran Eldis, Ph.D., CCC-A/SLP

Spectrum Health/Devos Children's Hospital Cochlear Implant Program

100 Michigan St. NE

Grand Rapids, MI 49503

Ph. 616-391-3787 Fax 616-391-3787

Contact: Kirsten Kramer, CCC-A, Darcy Jaarsma, CCC-A